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APPLICANTS

James J. Rawnick, Palm Bay, FL;

Stephen B. Brown, Palm Bay, FL;

** CONTINUING DATA *****

SJ None

** FOREIGN APPLICATIONS *****

SJ None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/30/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	FL	3	18	2
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

39207
 SACCO & ASSOCIATES, PA
 P.O. BOX 30999
 PALM BEACH GARDENS , FL
 33420-0999

TITLE

Variable waveguide

FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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